	(Requestor's Name)						
	(Address)						
	(Address)	<u> </u>					
	(City/State/Zip/Phone #)						
PICK-U	P WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of 9	Status					
Special Instructions to Filing Officer.							
J. HORNE							
JUN - 3 2022							

Office Use Only



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RECEIVED

XORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCC	OUNT NO.	:	120000000)195	
RE	FERENCE	:	720664	8176882	
AUTHOR	RIZATION	:	VX	7	
cos	T LIMIT	:	\$25.00	Reman	
			u		
ORDER DATE : June 2,	2022				
ORDER TIME : 2:32 PM	I				
ORDER NO. : 720664-0	05				
CUSTOMER NO: 81768	82				
				. .	
<u>CHANGE OF AGENT</u>					
NAME: RENT-PRO EQUIPMENT, LLC					
PLEASE RETURN THE FOLL	OWING AS	PRC	OF OF FIL	JING:	
CERTIFIED COPY X PLAIN STAMPED COPY					
A THILLD	CO1 1				
CONTACT PERSON: Eylie	na Baker		EXT#		

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: RENT-PRO EC	DUIPMEN'	, LLC				
2. (a)	2905 N Pine Avenue	(b	P.O. Box	: 95			
~· (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO					_
	Ocala, FL 34475		Boston, C	GA 31626	_		
	May 16, 2022	_	L2200022	8475			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)				_			
,	Registered Agent and Registered Office shown on the records o	Ethe Florida	Dept. of Stat	e:			
	Groover, James M., Jr			_			
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS					
	2890 Industrial Plaza Drive			_	ALL AEC	2022	
	Tallahassee F	, 32301			た対	2022 JUN -2	
(b)	Enter name of NEW Registered Agent and/or NEW Registere Corporation Service Company NEW Registered Office Address: 1201 Hays Street		iress:		YOF STATE	2 AM 9: 14	ED.
	Tallahassee F	l		_			
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members deles of organization or the operating agreement of the	e registere lability cor of the limi	d office an npany, it is ted liability	d the business office s hereby confirmed t y company or as oth	of the i	registe change	red e(s)
/s	3/ James M. Groover Jr.	Jam	James M. Groover Jr., Authorized Person				
I here provisi the obl to mero notified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change. The Many to office address of the configuration of the change.	ree to act performa ed for in C hereby co	in this cape nce of my c hapter 605 yirm that i	Printed or typed name of acity. I further agreed duties, and I am fam is, F.S. Or, if this docthe limited liability c	e to con	iply wi h and s bein : has t	ith the accept g filed een
	y M. Baronie, Asst. Vice President on behalf of Corporation Servi	ice Company					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00